

BOARD OF MEDICAL LICENSURE AND DISCIPLINE
FULL BOARD
MINUTES OF MEETING
14 SEPTEMBER 2005
Open Session

Board Members in Attendance:

David R. Gifford, MD, MPH, Chair

Patrick Barry, Esq.

Thomas Breslin, MD

Norm Chapman

Margaret Coughlin

Charles Cronin, DO

Joseph DiPietro, Esq.

Richard P. Iacobucci, MD

Noubar Kessimian MD

Henry Litchman, MD

Shelagh McGowan

Board Members Absent:

Robert Dinwoodie, DO

Staff Members in Attendance:

Robert S. Crausman, MD, Chief Administrative Officer

Bruce W. McIntyre, Esq., Deputy Chief Legal Counsel

Linda Julian, Investigator

Mary Salerno, Administrative Officer

Guests:

Herb Constantine, MD, Facilities and Regulations

Ray Rusin, Facilities and Regulations

Kathleen Heron, The Alliance for Better Long-Term Care

1. A quorum was established at 8:30 AM.

2. On a motion by Mr. Chapman seconded by Ms. McGowan it was voted to approve the minutes of the Open Session of the August 14, 2005 meeting.

3. Licensing Committee:

On a motion by Mr. DiPietro seconded by Dr. Iacobucci it was voted to approve the Licensing Committee minutes of the September 8, 2005 meeting with the following addition to the licensing list:

Joan C. DeSantis, MD

4. Chief Administrative Officer's Report

A. Dr. Crausman addressed the Board regarding physicians displaced by hurricane Katrina and the many requests that the Medical Board has received to expedite applications for those physicians wishing to relocate to Rhode Island. The process is fairly straightforward. Once the physician's Louisiana status has been verified they may be granted a license pending FCVS. The process should take 1 month to 45 days.

B. Dr. Crausman presented the Board with one consent order regarding a license application. Dr. Mark Boutros has agreed to a limited license with a one-year probation for the sole purpose of completing post-graduate requirements.

On a motion by Dr. Litchman seconded by Dr. Kessimian it was voted to approve the consent order.

C. Dr. Herb Constantine and Mr. Ray Rusin then presented the Board with an update from the Department of Health's Facilities and Regulations Division. There was discussion regarding the new RI statutes for Medical Directors and the process for compliance for facilities.

Dr. Constantine discussed concerns that many facility Medical Directors have with the new statutes, specifically the additional duties and responsibilities that have been imposed on them. Dr. Gifford

pointed out that although many of these Medical Directors are not members of AMDA they were all informed of the draft language for these statutes by the Department of Health. There was a public hearing regarding the language and the DOH did not receive phone calls relating these concerns. The forthcoming federal regulations will be stricter than Rhode Island regulations.

Mr. Rusin addressed questions regarding the June and July facility compliance reports. There has been substantial quality of care and enforcement. Facilities have maintained a positive for both months. Three facilities are on the termination track for minor infractions but are expected to come back into compliance. Many times a facility will appear to remain in non-compliance multiple months in a row due solely to the inability of Facilities and Regulations to schedule a follow-up site visit within a six-month time frame. The procedure for notification of a facility's non-compliance is to notify the Medical Director, then the attending physician, and finally the family.

D. The RI Department of Ethics' Recusal Form was discussed. Previously, the Board policy had been that if a Board member felt that he/she had a conflict they would recuse themselves and leave the room during discussion and voting on a particular case. Board members may now submit the Recusal Form once they identify an upcoming conflict, which will be kept on file.

E. Kathleen Heron from the Alliance for Better Long-Term Care

addressed the Board regarding the Alliance's role in maintaining standards of care in Rhode Island for people requiring home-care and long-term care. Including herself and Roberta Hawkins, her Co-Director, the Alliance consists of 4 nurses and 3 social workers. The role of the Alliance is to act as an advocate for the elderly who are no longer able to represent themselves. This includes investigations and court appearances. The Alliance's authority is granted through the Federal Government Older Americans' Act.

The 2 main concerns that the Alliance is currently addressing are 1) quality of psychological services care and 2) end of life decision-making. Many who require it are not receiving proper psychological services. Often these individuals are sent off to a hospital ER for treatment and are overmedicated without actually seeing a psychiatrist. End of life decisions are not being addressed prior to the death of an individual. The Alliance is working to establish a collaborative environment with the family, patient, and the physician to prepare for these crises. Living wills were discussed including the protocol for enquiring if an individual has a living will or if they would like to have one created.

5. There was no old business to discuss.

6. New business:

There was a general consensus to provisionally approve the request

by Dianna R. Stallone for Drs. Nasser and Haj-Darwish to form a second corporation named Woonsocket Urgent Care, P.C.

7. At 9:20 AM the Board adjourned to Closed Session.